All-Payer Claims Databases

Alaska Health Care Commission June 20, 2013







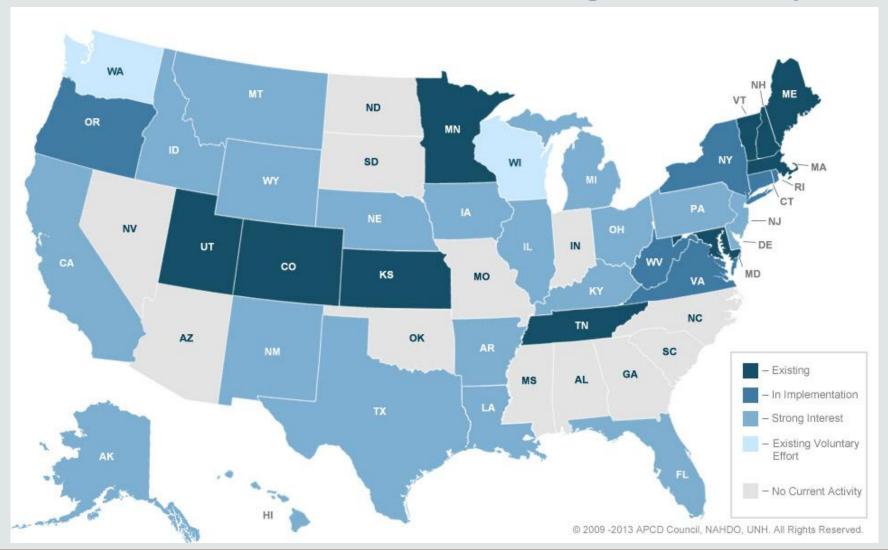
Our Work

- Early Stage Technical Assistance to States
- Shared Learning
- Catalyzing States to Achieve Mutual Goals

www.apcdcouncil.org



March 2013 State Progress Map



Typical APCD Data Sets

Commercial /
TPAs / PBMs /
Dental / Medicare
Parts C & D

Medicaid FFS /
Managed Care /
SCHIP

APCD

Medicare Parts A & B **FUTURE:**

TRICARE & VA &
IHS & FEHB

FILE

PROVIDER

Evolution of Data Sets for States

Administrative Data Sets

- Hospital Discharge
- Medicaid
- Medicare
- All-Payer Claims
 Databases

Clinical Data Sets

- Public Health Registries
- Clinical Registries
- Electronic Health Records
- Laboratory Systems
- Health Information Exchanges

Linkage?

Strategic IT Opportunities Population Health CER studies; Rate review; MLR supplement review; product HIE with APCD /benefit design; transactions; **APCD** etc. etc. Link Send claims, clinical eligibility, non-claim w/ fiscal financial Shared transactions Services* HIE HIX Link * Future shared Relationship studies services opportunities benefits between benefits might include master w/care and care delivery; provider or patient delivery indexes or other quality rankings for services. HBE/HIX; etc.

Data Release

- WHO Is Granted Access To WHICH Data Under WHAT Circumstances?
 - Data Release Boards / Privacy Boards
 - Data Use Agreements
- Are Data To Be Considered a Public Utility By The State And Stakeholders?
- Release "Staging" and Formats

Data Release Formats By State (03/13)

	Public Use	Limited Use	Public		
State	File	File	Website(s)	Reports	Notes
Colorado					
Connecticut					Construction
Kansas					
Maine					
Maryland					
Massachusetts					
Minnesota					No release yet
New Hampshire					
New York					Construction
Oregon					
Rhode Island					Construction
Tennessee					No release yet
Utah					
Vermont					
Virginia					Construction
West Virginia					Construction

Usage Examples

Something for Everyone

HEALTH DEPARTMENT INSURANCE DEPARTMENT

POLICY MAKERS

MEDICAID

PURCHASERS

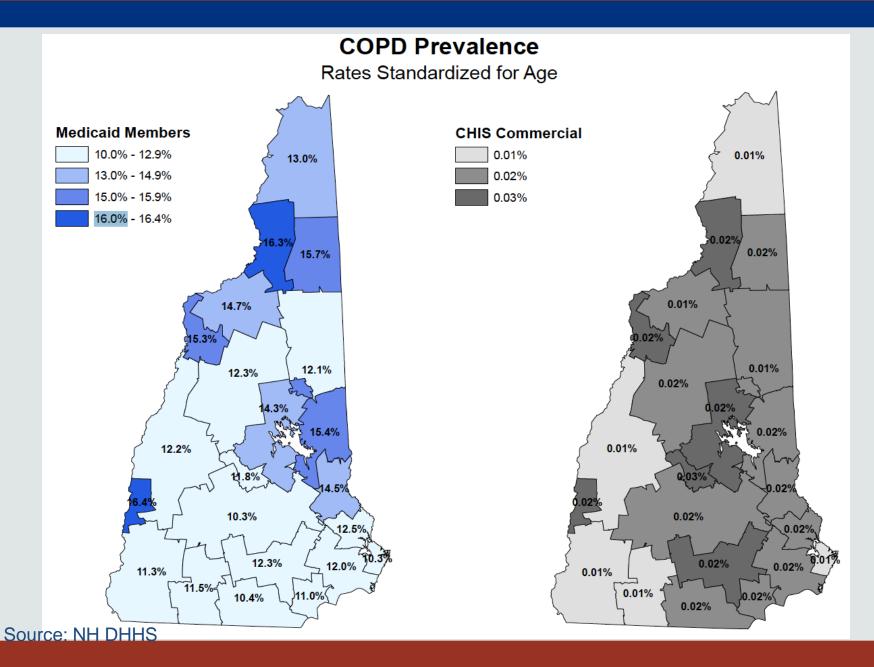
RESEARCHERS

PROVIDERS

PAYERS

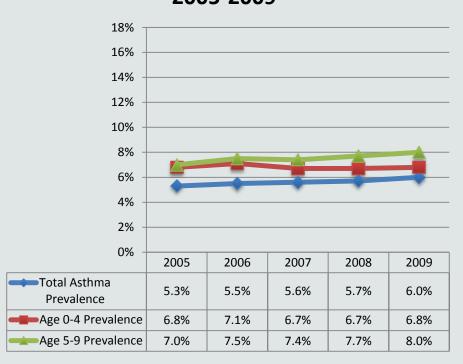
CONSUMERS

Population Health

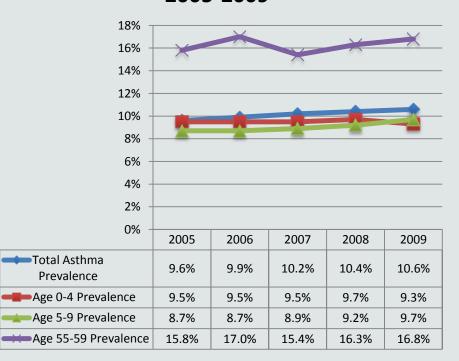


Prevalence of Asthma by Age, NH Medicaid and Commercial Members, 2005-2009

NH Commercial Asthma Prevalence 2005-2009



NH Medicaid Asthma Prevalence 2005-2009

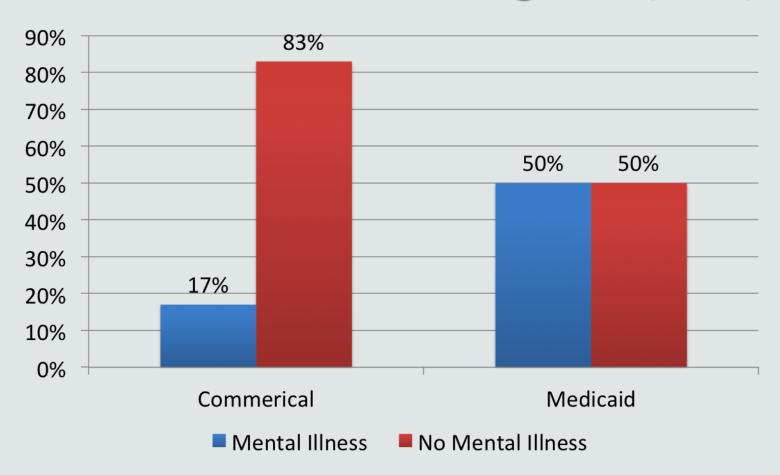


SOURCE: NH DHHS; www.nhchis.org

Selected Prevalence Conditions – Vermont Commercial Population – 2007-2009

Major Disease Category	• ,	• •	Rate/1,000 Members
	2007	2008	2009
Cancers			
Breast Cancer	6.3	6.3	6.6
Lung Cancer	1	1	1
Colorectal Cancer	1.2	1.1	1.2
Digestive System Diseases	101	99.5	101.1
Heart & Other Circulatory Diseases			
Coronary Heart Disease	13.2	12.9	13.5
Stroke	4.8	4.9	5.2
Congestive Heart Failure	2.3	2.3	2.2
Genitourinary System Disorders	160.5	156.3	156.0
Respiratory System Disorders	263.3	255.5	261.1

Commercial vs. Medicaid Adults > Age 19 with Mental Health Diagnosis, NH, 2007



SOURCE: NH Center for Public Policy Studies

Lifetime Prevalence of Mental Illness by Age Group, Commercial Population, NH, 2007

	Age Grouping				
# of Disorders	18-29	30-44	45-59	60+	
1 Disorder	52%	55%	47%	26%	
2 Disorders	34%	34%	27%	12%	
3 or More					
Disorders	22%	23%	16%	5%	

SOURCE: NH Center for Public Policy Studies



A Snapshot of Clinical Performance by Utah Small Area

Blood Sugar Screening (HbA1c): Diabetes

What is the measure?

This measure tracks all diabetic individuals who have had their blood sugar levels screened within the measurement year.

Who is eligible?

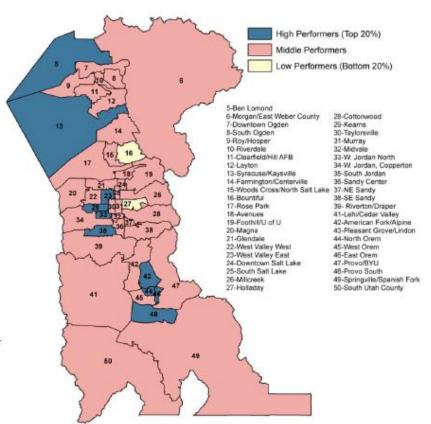
This measure examines all members 18 to 75 years of age who have been diagnosed with diabetes (type 1 and 2).

Why is this measure important?

Individuals with diabetes who maintain near normal HbA1c levels can gain on average, an extra five years or life, eight years of sight and six years free from kidney disease.

SOURCE: Utah Health Atlas

Utah: Wasatch Front



About Us A-Z Index

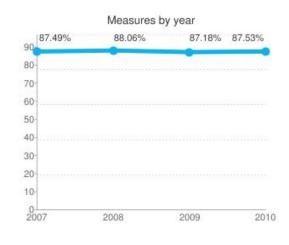


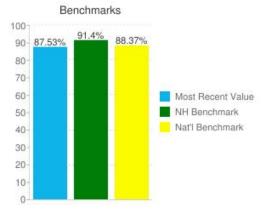
- DHHS Medicaid Home
- Medicaid Report Card Home
- Report Topics
 - Access to Quality
 Hospital Services
 - Access to Quality
 Primary Care Services
 - Dental Access
 - Diabetes
 - Health Risk Behaviors
 - Heart Disease and Stroke
 - Maternal, Infant and Child Health
 - Mental Health and Substance Use Disorders
 - Respiratory Diseases

Medicaid Report Card

Results for: Use of Appropriate Medications for People with Asthma (ASM)

Measures by Year





Data

Year	Measure Numerator	Measure Denominator	Measure Value	NH Benchmark	National Benchmark
2010	1,565	1,788	87.53%	91.4%	88.37%
2009	1,380	1,583	87.18%	89.9%	88.57%
2008	1,542	1,751	88.06%	90.7%	86.9%

Map 1. Per Capita Cost of Care, Medicaid Population, Ages 0-64, 2011

Less than 90% of the state average

90% - 110% of the state average

Greater than 110% of the state average

State Average: \$2,461

Notes

Data based on residence of 792,000 individuals. Cost of care does not include care for which claims are not submitted (i.e. HMOs and behavioral health). Analysis does not include claims related to substance abuse, but does include patient cost sharing. Data not adjusted for case mix.

Source

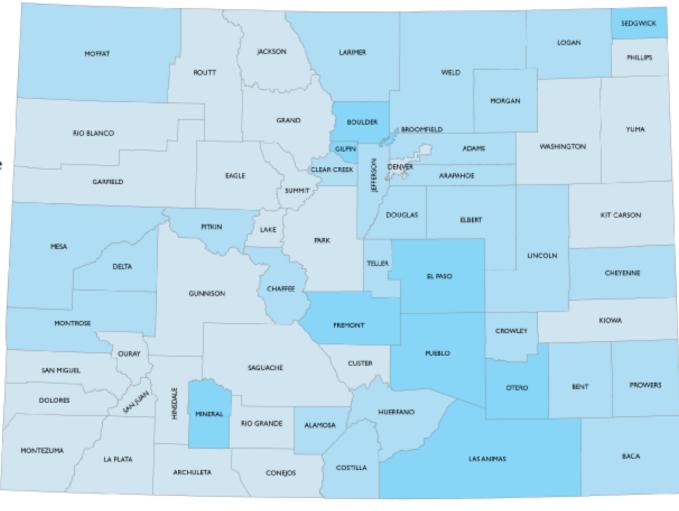
Colorado All Payer Claims Database, Center for Improving Value in Health Care, October 2012

www.cohealthdata.org



CENTER FOR IMPROVING

SOURCE: CIVHC, www.cohealthdata.org



Map created by the Colorado Health Institute 100 Miles



NH CLAIMS Web Reporting and Query Module

Report Type: Prevalence Report Category: Diabetes

Report Sub-category: Diabetes Rate

Type of Payer=Commercial Measurement Year 2009

	County of Residence=Belknap				State of New Hampshire Total						
Age Group (Standard)	Rate per 1,000	Lower 95% CI	Upper 95% CI	Number of Selected Individuals	Number of Population Individuals	Rate per 1,000	Lower 95% CI	Upper 95% CI	Number of Selected Individuals	Number of Population Individuals	Significance
** Age-Adjusted Total **	28.7	26.9	30.5	N/A	N/A	27.7	27.3	28.1	N/A	N/A	Not Sig
0-4	*	*	*	*	765	0.5	*	*	9	15,154	*
5-14	2.8	*	*	7	2,466	3.1	2.6	3.6	156	49,762	*
15-24	7.7	4.9	11.6	23	2,965	6.0	5.3	6.6	342	56,948	Not Sig
25-34	14.8	10.0	21.0	31	2,086	11.8	10.8	12.8	498	42,011	Not Sig
35-44	26.0	20.7	32.3	82	3,150	26.7	25.4	28.0	1,664	62,237	Not Sig
45-54	56.1	49.1	63.0	249	4,437	56.0	54.4	57.6	4,683	83,558	Not Sig
55-64	110.3	100.2	120.4	457	4,142	107.7	105.3	110.2	7,464	69,243	Not Sig
** Crude Total **	42.5	39.6	45.3	851	20,011	39.1	38.4	39.7	14,816	378,913	N/A

Source: http://www.nhhealthwrqs.org

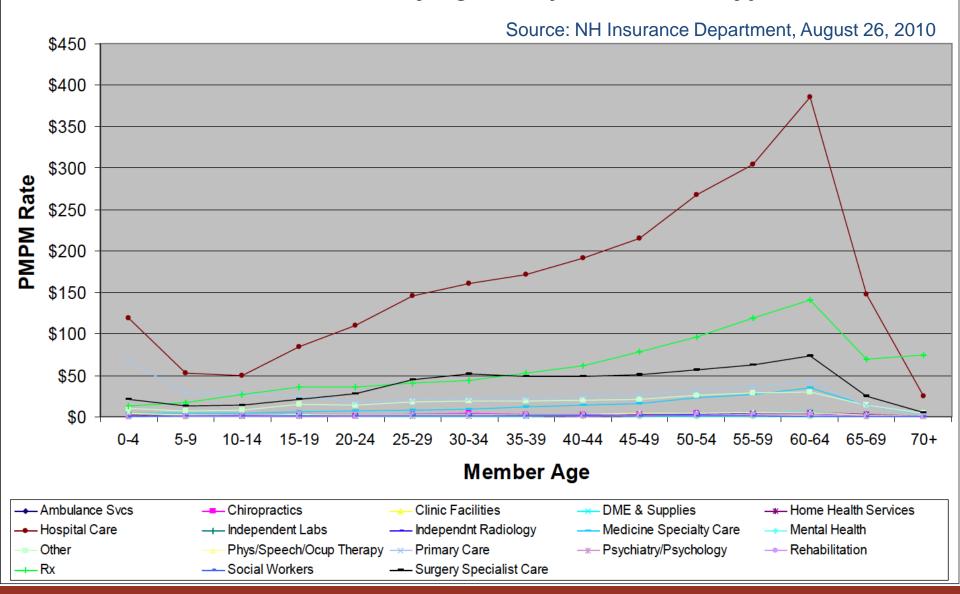
Adverse Drug Event IP Discharges, Rates, and Payments, by Carrier, Maine Commercial Claims, 2006-2007

Carrier	ME	Rate /	ME	% Total
(Blinded)	Discharges	1,000	Payments	Payments
		Discharges		
1	39	0.77	\$273,288	1%
2	127	2.52	\$1,320,522	0%
3	9	0.18	\$55,807	0%
4	1,254	24.92	\$23,014,786	90%
5	4	0.08	\$21,312	0%
6	84	1.67	\$884,545	3%
Total	1,517	30.14	\$25,570,259	100%

Source: MEHAF

State Regulatory Agencies

2009 PMPM Rates by Age Group and Service Type



Medicaid Payment Rate Benchmarking

Average Payment Including Patient Share, 2006

				,
Procedure Code	Health Plan 1	Health Plan 2	Health Plan 3	NH Medicaid
99203 Office/Outpatient Visit New				
Patient, 30min	\$124	\$115	\$130	\$42
99212 Office/Outpatient Visit				
Established Patient, 10min	\$51	\$48	\$52	\$30
99391 Preventive Medicine Visit				
Established Patient Age <1	\$111	\$102	\$107	\$61
90806 Individual psychotherapy in				
office/outpatient, 45-50min	\$72	\$71	\$71	\$61

SOURCE: NH DHHS





Reports Home Chronic Diseases Diabetes Mental Health Disorders Chronic Respiratory Disease Cardiovascular Disease Reports Use and Cost

Categories of Service

Ambulatory Care Sensitive Conditions

Payment Categories

Emergency Department Use

Pharmacy Use and Cost

Type of Service

Payments Members per Month

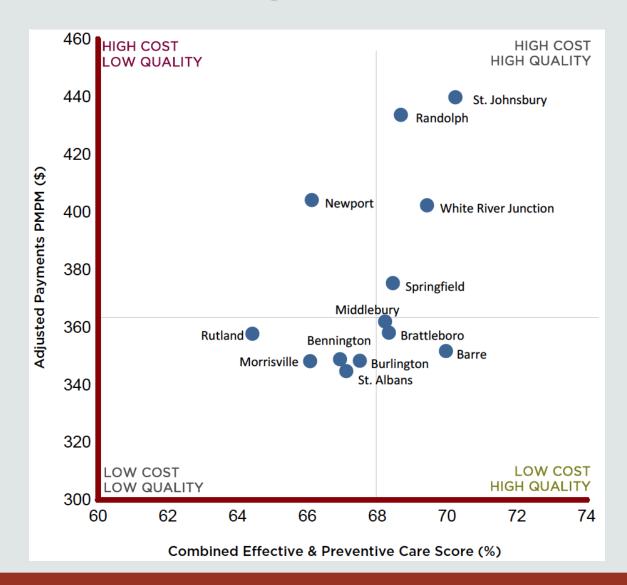
Enrollment

Child Health and Care Reports

Medicaid Prevalence of Diabetes (5A)	‡	
Eligibility Category: All Elig Cat Groupings Total Medicaid Enrollment	Health Analysis Area: All HAA Groupings State Total	CCS Group: Total Infectious and parasitic diseases
Low Income Child Low Income Adult	Berlin Claremont	Neoplasms Endocrine; nutritional; and metabolic diseases and immunity disorders
Medicare Eligibility Selection All Members Only Members not Eligible for Medicare	Year: 2010 ÷	Display Report
Only Members also Eligible for Medicare		
Only Members also Eligible for Medicare H CHIS CommercialDiabetes Repor		
		÷
Only Members also Eligible for Medicare H CHIS CommercialDiabetes Report Report Type:	rts	÷ Health Analysis Area:

SOURCE: http://www.nhchis.org

Vermont Comparative Costs and Quality by Region

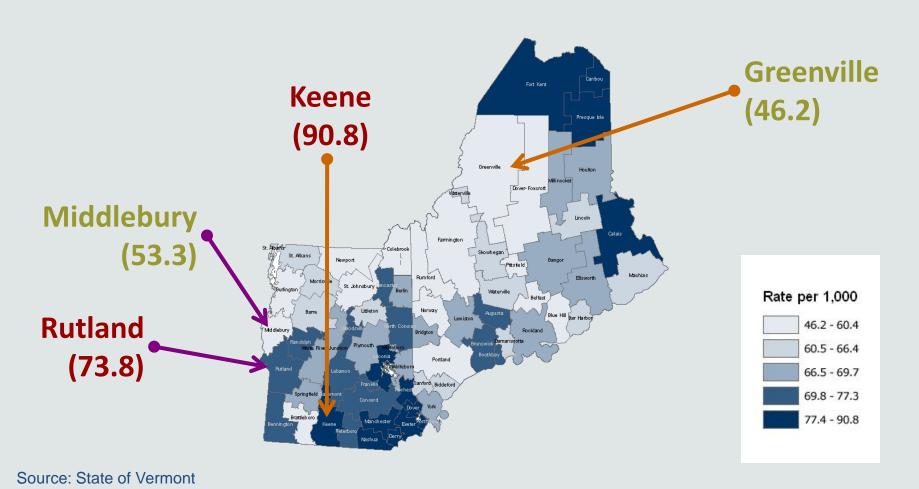


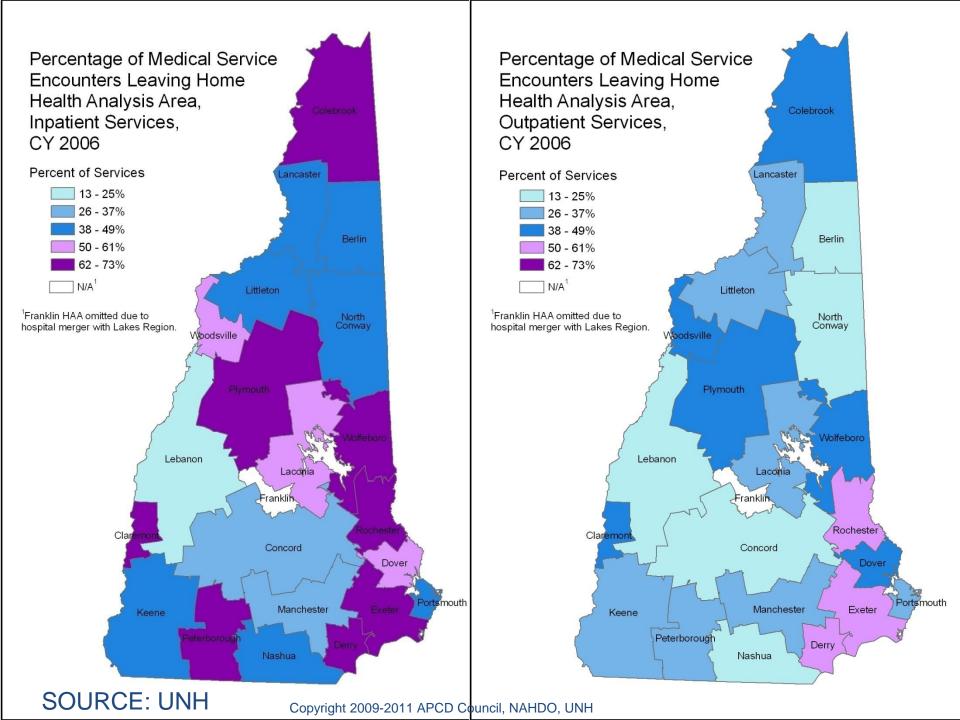
The scattergraph shows the relationship between the rate of payments and the rate of effective and preventive care. The graph's vertical axis displays the rate of payment per member per month (PMPM) adjusted for differences in age, gender, and health status of the population. The graph's horizontal axis displays the combined effective and preventive care score. The crosshair lines display the statewide average for each axis; subpopulations are classified into quadrants based on comparison to the statewide average.

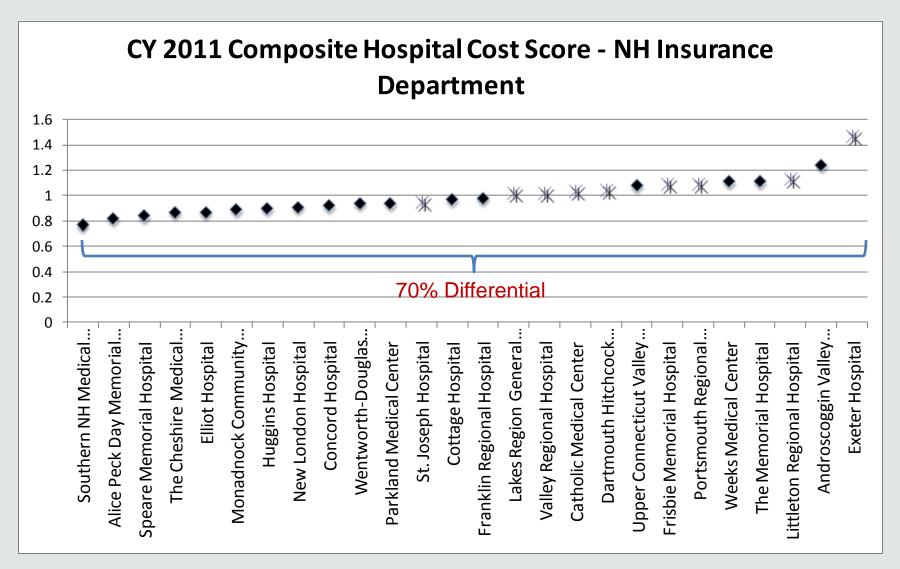
SOURCE: VT BISHCA

Tri-State Variation in Health Services

Advanced Imaging – MRIs







Tier 1=Diamond, Tier 2=Asterisk

NH HealthFirst Plan Design

- Developed in 2009
- 4 Carriers
- Tiered Network Hospital Deductibles
- Expanded Preventive Care Benefits
- 3 Tier and Mail Order Rx
- Wellness Plan with Rewards and Deductible Credits
- Target Rates at 10% of Prior Year's Median
 Wage

http://www.nh.gov/insurance/media/documents/hf_ppt_coc.pdf

NH Carrier Discounts – 2009 Commercial

Aggregate Discounts (Below)

HMO Discounts by Carrier (Right)

- 1) Anthem NH = 38.6%
- 2) Harvard Pilgrim Health Care = 38.5%
- 3) Connecticut General Life Insurance/Cigna = 32.9%
- 4) MVP = 30.4%
- 5) All other insurance = 20.5%

HMO – All Providers Included

		Average		
Carrier	Observations	Discount	Lower CI	Upper CI
All Other Insurance	2,281	34.3%	33.4%	35.2%
CGLI/Cigna	11,079	34.1%	33.8%	34.5%
Anthem - NH	590,534	31.2%	31.2%	31.3%
Harvard Pilgrim HC	240,825	30.2%	30.1%	30.3%
MVP	303	30.1%	27.8%	32.5%

<u>HMO – Hospitals Only</u>

Carrier	Observations	Average Discount	Lower CI	Upper CI
Anthem - NH	106,527	38.6%	38.5%	38.8%
Harvard Pilgrim HC	48,330	36.0%	35.8%	36.1%
CGLI/Cigna	2,064	34.1%	33.5%	34.8%
MVP	69	22.4%	19.5%	25.4%
All Other Insurance	435	21.5%	20.1%	22.8%

HMO - No Hospitals

		Average		
Carrier	Observations	Discount	Lower CI	Upper CI
All Other Insurance	1,846	37.3%	36.4%	38.3%
CGLI/Cigna	9,015	34.1%	33.7%	34.5%
MVP	234	32.4%	29.5%	35.2%
Anthem - NH	484,007	29.6%	29.5%	29.6%
Harvard Pilgrim HC	192,495	28.8%	28.7%	28.9%

Source: NH Insurance Department, January 28, 2010

NH vs. Out -of-State Spending

2009 Commercial Membership

A H ther	161,556	23,561 166,260 38,663	15% 103% 24%	10% 85%	\$2,472 \$3,047	1.30 0.91
_	161,556				\$3,047	0.91
ther	,	38,663	24%			
			24 /0	5%	\$838	1.21
					\$2,614	1.00
^		40.550	200/	420/	\$2.052	4.22
	-					1.32
Η	95,662	•				0.90
ther		15,096	16%	5%	\$1,011	1.24
					\$2,591	1.00
A		13,667	30%	12%	\$1,525	1.23
Η	45,560	46,630	102%	77%	\$2,919	0.87
ther	•	25,334	56%	11%	\$743	1.12
					\$2,053	1.00
<u></u>	her	95,662 her A 45,560	95,662 96,064 her 15,096 13,667 H 45,560 46,630	95,662 96,064 100% her 15,096 16% A 13,667 30% H 45,560 46,630 102%	95,662 96,064 100% 84% her 15,096 16% 5% A 13,667 30% 12% 45,560 46,630 102% 77%	95,662 96,064 100% 84% \$2,949 her 15,096 16% 5% \$1,011 \$2,591 A 13,667 30% 12% \$1,525 H 45,560 46,630 102% 77% \$2,919 her 25,334 56% 11% \$743

Source: NH Insurance Department, August 2, 2010

Consumers



Detailed estimates for Arthroscopic Knee Surgery (outpatient)

Procedure: Arthroscopic Knee Surgery (outpatient)

Insurance Plan: Anthem - NH, Health Maintenance Organization (HMO)

Within: 20 miles of 03301

Deductible and Coinsurance Amount: \$200.00 / 10%

Lead Provider Name	Estimate of What you Will Pay	Estimate of What Insurance Will Pay	Estimate of Combined Payments
CONCORD AMBULATORY SURGERY CENTER	\$507	\$2769	\$3276
CAPITAL ORTHOPAEDIC SURGERY CENTER	\$553	\$3177	\$3730
DARTMOUTH HITCHCOCK SOUTH	\$601	\$3609	\$4210
LAKES REGION GENERAL HOSPITAL	\$664	\$4178	\$4842
SPEARE MEMORIAL HOSPITAL	\$673	\$4264	\$4937
FRANKLIN REGIONAL HOSPITAL	\$681	\$4334	\$5015
CATHOLIC MEDICAL CENTER	\$759	\$5036	\$5795

MyHealthCareOptions*



A Health Care Resource Provided by the Commonwealth of Massachusetts Health Care Quality and Cost Council

Summarized Report

For Patients & Families

About The Ratings

Frequently Asked Questions

Resources & Tools

View Statewide Procedure

Median State Cost

About Us

Feedback

□ Comparison of Providers



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Patient Safety

Serious Reportable Events

Surgical Care

Patient Experience

Patient Experience

Bone and Joint Care

Back Procedure

Hip Fracture

Hip Replacement

Knee Replacement

Cardiovascular Disease

Angioplasty

Bypass Surgery

Cardiac Screening Tests

Heart Attack

Heart Failure

Heart Valve Surgery

Stroke

Digestive System

Gall Bladder

Intestinal Surgery

Weight-loss Surgery

Cardiovascular Disease: Bypass Surgery

Bypass surgery involves transplanting a blood vessel from your leg or chest to the heart to get around (or "bypass") a blockage in the heart's blood supply. (more)

Diagnostic classification: Coronary Bypass with cardiac catheterization (APR-DRG 165); Coronary Bypass only (APR-DRG 166)

View Detailed Report

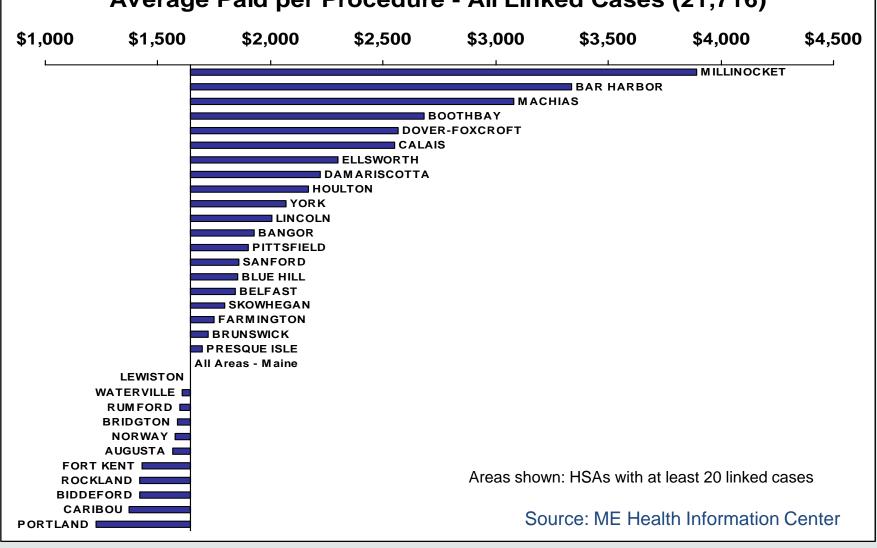
Cost

		Costs	
Quality of Care (more)			
	Boston Medical Center	Brigham & Women's Hospital	Massachusetts General Hospital
Quality Rating	黄黄	会会	黄黄
Statistical Significance	Not different from State Average Quality	Not different from State Average Quality	Not different from State Average Quality
Cost of Care (more)			
	Boston Medical Center	Brigham & Women's Hospital	Massachusetts General Hospital
Cost Rating	\$	\$\$	\$\$\$
Statistical Significance	Below Median State	Not Different from	Above Median State

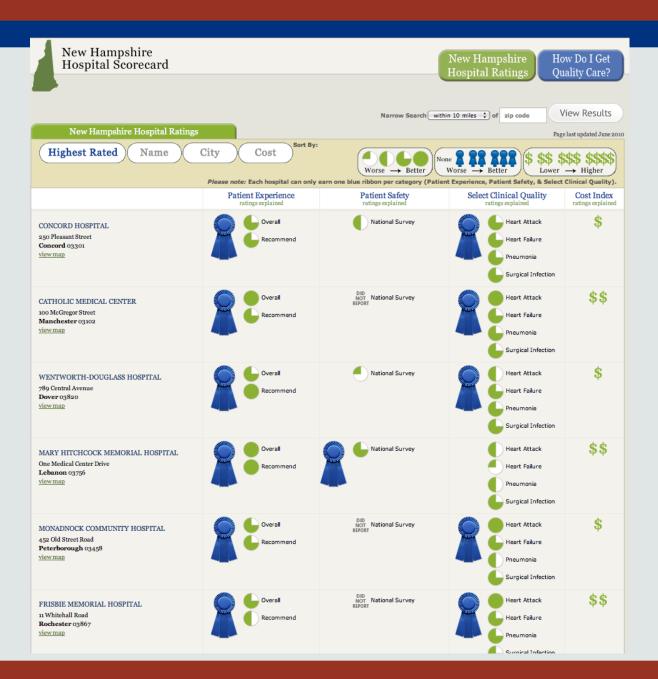
Cost

Colonoscopy by HSA

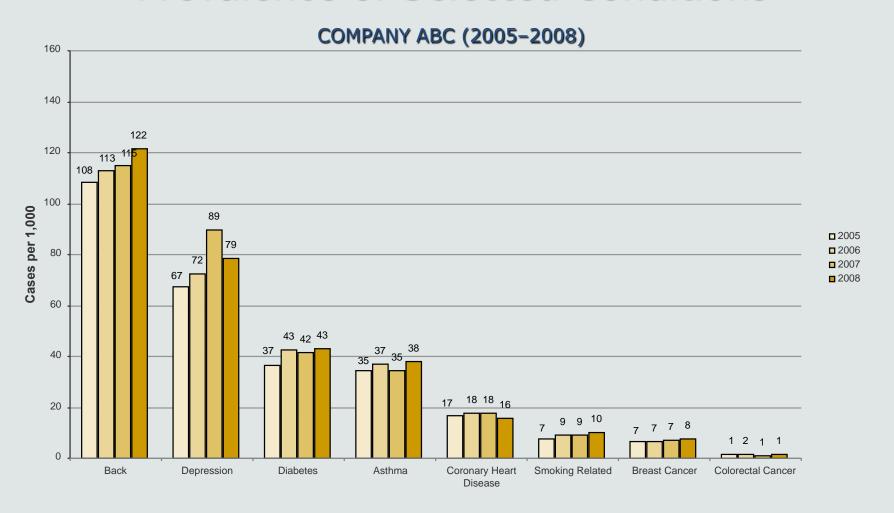
Average Paid per Procedure - All Linked Cases (21,716)



Purchasers

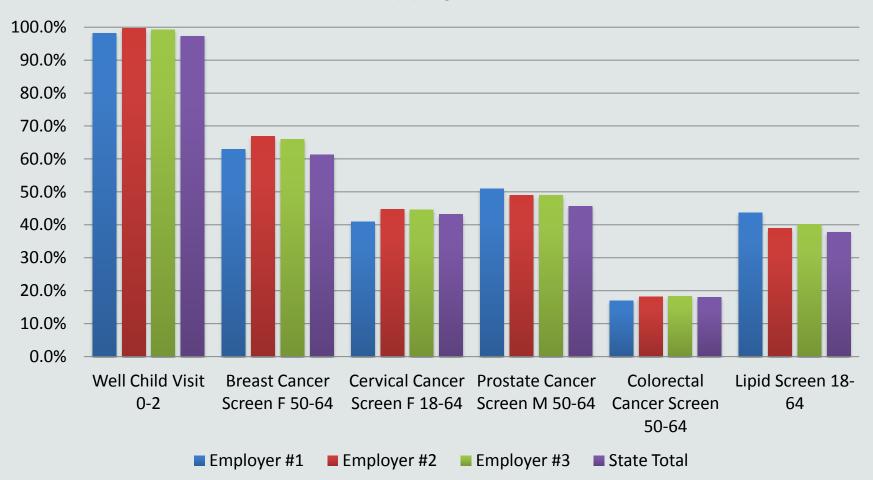


Prevalence of Selected Conditions



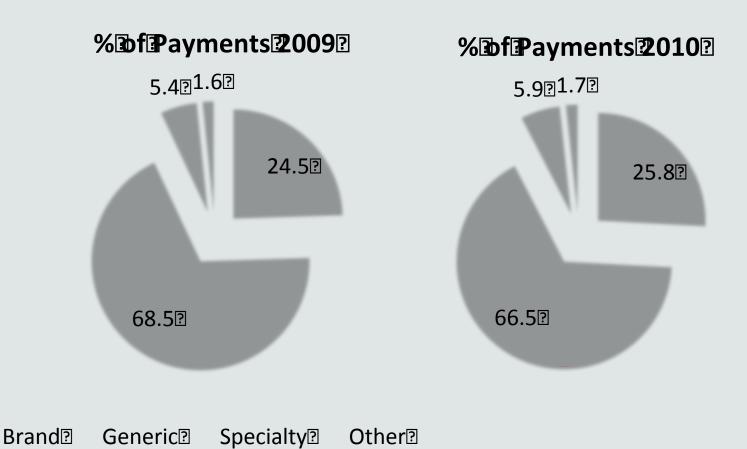
SOURCE: NHPGH

Preventive Rates By Employer vs. State Total FY 2012



Source: NHPGH

Rx Volume by Type – NH 3 Largest Payers 2009 and 2010



Source: NH Purchasers Group on Health; UNH Center for Health Analytics

Top 10 Therapeutic Class by Number of Scripts, Utah, 2009

	Therapeutic Class	Total Cost	Utilizing Members	Cost Per Member	Number of Scripts	Average Cost Per Script	Percent Generic
1	ANTIDEPRESSANTS	\$18,338,790	94,876	\$531	526,540	\$35	80 %
2	ANALGESICS - OPIOID	\$11,508,735	129,968	\$469	444,927	\$26	96 %
3	ANTIHYPERLIPIDEMICS	\$15,201,559	62,289	\$658	325,794	\$47	63 %
4	ANTIHYPERTENSIVES	\$9,771,828	58,762	\$418	320,653	\$30	67 %
5	ULCER DRUGS	\$22,198,987	71,613	\$1,136	279,649	\$79	76 %
6	CONTRACEPTIVES	\$5,943,860	48,213	\$373	230,791	\$26	57 %
7	THYROID AGENTS	\$1,878,011	45,379	\$116	221,639	\$8	89 %
8	ANTIDIABETICS	\$19,249,166	33,623	\$1,445	220,602	\$87	53 %
9	PENICILLINS	\$1,660,924	134,258	\$110	195,531	\$8	99 %
10	DERMATOLOGICALS	\$10,904,253	99,052	\$864	190,709	\$57	69 %

Source: Utah Department of Health, 2011

Top 10 Therapeutic Class by Total Cost, Utah, 2009

	Therapeutic Class	Total Cost	Utilizing Members	Cost Per Member	Number of Scripts	Average Cost Per Script	Percent Generic			
1	ULCER DRUGS	\$22,198,987	71,613	\$1,136	279,649	\$79	76 %			
2	ANTIDIABETICS	\$19,249,166	33,623	\$1,445	220,602	\$87	53 %			
3	ANTIDEPRESSANTS	\$18,338,790	94,876	\$531	526,540	\$35	80 %			
4	ANTIHYPERLIPIDEMICS	\$15,201,559	62,289	\$658	325,794	\$47	63 %			
5	ANTIASTHMATIC AND BRONCHODILATOR AGENTS	\$14,187,136	52,501	\$1,360	175,722	\$81	8 %			
6	ANALGESICS - OPIOID	\$11,508,735	129,968	\$469	444,927	\$26	96 %			
7	ADHD/ANTI-NARCOLEPSY/ANTI- OBESITY/ANOREXIANTS	\$11,245,893	29,251	\$1,187	134,252	\$84	38 %			
8	ANTICONVULSANTS	\$11,111,165	34,016	\$990	175,778	\$63	86 %			
9	DERMATOLOGICALS	\$10,904,253	99,052	\$864	190,709	\$57	69 %			
10	ANTIPSYCHOTICS/ANTIMANIC AGENTS	\$9,880,361	10,620	\$3,018	52,552	\$188	31 %			
So	Source: Utah Department of Health, 2011									

Reform

APCDs and Health Reform

- Population health evaluation
- Prevalence measures
- Utilization and spending
- Quality measures
- Risk stratification for chronic conditions

- Risk adjustment
- Rate review audits
- Consumer engagement
- Employer engagement

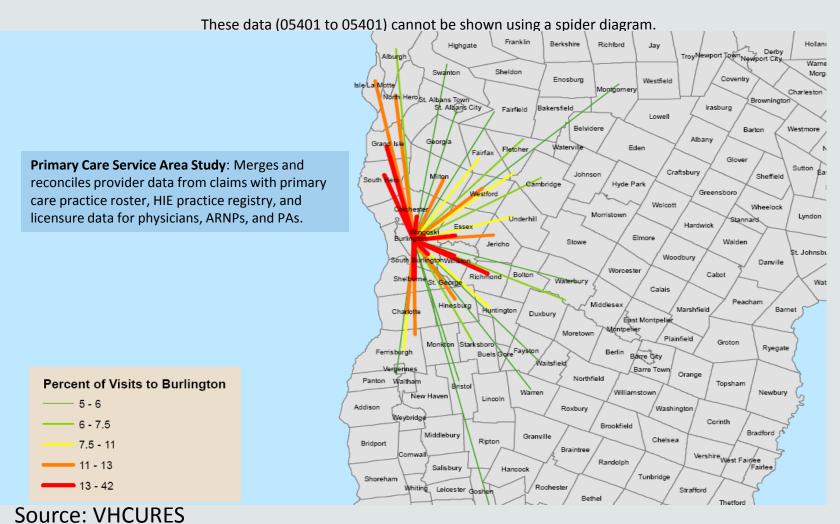
Preliminary Indicators Report, NH Medical Home Pilot Total Costs by Practice Site vs. Non-Medical Home Sites

Practice Site	Total Cost PMPM Baseline Period January 2008 – June 2009	Total Cost PMPM Pilot Period July 2009 – September 2010		
Site #1	\$196	\$118		
Site #2	\$218	\$158		
Site #3	\$335	\$229		
Site #4	\$172	\$110		
Site #5	\$261	\$207		
Site #6	n/a	\$225		
Site #7	\$251	\$127		
Site #8	\$182	\$128		
Site #9	\$203	\$120		
Total NH MH Sites	\$240	\$151		
Total NH Non MH Sites	\$240	\$222		

^{*}Notes: PRELIMINARY DATA: Excludes pharmacy data, is not risk adjusted, is not annualized, and unadjusted for contractual differences.

% of Each Vermont Town's Primary Care Visits to Burlington

49.6% of Burlington member visits (05401 Zip Code) were to providers in the 05401 Zip Code.



Chronic Condition Costs

2011 Member Counts and Medical Claims PMPM for Chronic Conditions*, NH ACP Sites and State Comparator

* Diabetes, CVD, CHF, COPD, Asthma, using OptumInsight ETG Grouper

Population	ACP Site Total Members	ACP Site Total PMPM	State Comparator Total Members	State Comparator Total PMPM
No Chronic Conditions	105,007	\$281	291,867	\$293
With Chronic Condition	25,537	\$729	79,733	\$762
1 Chronic Condition	21,212	\$601	65,238	\$613
2 or More Chronic Condition	4,325	\$1,357	14,495	\$1,428
All Members	130,544	\$369	371,600	\$394

ACP ED Utilization

Emergency Department, PCP-Attributed Members, Commercial (CY 2011) and Medicaid (July 2011-June 2012), ACP Total Population

	COMMERCIA	AL		MEDICAID			
	% of Members	Rate per 1000	Overall PMPM	% of Members	Rate per 1000	Overall PMPM	
0 Emergency Dept. Encounters	83.3%	0	\$258	63.2%	0	\$281	
1 Emergency Dept. Encounter	12.6%	1,017	\$704	20.4%	1,039	\$397	
2-4 Emergency Dept. Encounters	3.8%	2,395	\$1,435	13.7%	2,617	\$586	
5+ Emergency Dept. Encounters	0.3%	7,133	\$3,770	2.7%	7,768	\$1,208	
All Emergency Dept. Encounters	100.0%	241	\$369	100.0%	793	\$373	

51% of Total Paid Amounts Attributed to 21% of Utah Residents

2009		Average Membership	Percent of Total	Total Paid	Percent of Total Paid	Average PMPM Paid
Healthy	1	447,536	59.12 %	\$210,658,763	13.83 %	\$39
One or More Significant Acute Diseases	2	47,143	6.23 %	\$147,971,524	9.71 %	\$262
One Minor Chronic Disease	3	72,613	9.59 %	\$119,479,635	7.84 %	\$137
Multiple Minor Chronic Diseases	4	26,580	3.51 %	\$81,621,476	5.36 %	\$256
One Significant Chronic Disease	5	93,954	12.41 %	\$279,710,984	18.36 %	\$248
Two Significant Chronic Diseases	6	62,852	8.30 %	\$491,379,041	32.25 %	\$652
Three or More Significant Chronic Diseases	7	2,606	0.34 %	\$47,821,421	3.14 %	\$1,529
Complicated Malignancies	8	2,281	0.30 %	\$87,605,836	5.75 %	\$3,200
Catastrophic Conditions	9	1,419	0.19 %	\$57,500,921	3.77 %	\$3,377

Source: Utah Department of Health, 2011

ETGs for Benign Conditions of the Uterus

Maine Commercial Claims (2006–2007); Full Episodes Outliers Removed Preference Sensitive Care

BENIGN CONDITIONS OF THE UTERUS	HYSTERECTOMY	OTHER SURGICAL PROCEDURES	WITHOUT SURGERY
ETG-Subclass	646	646	647
Number of Episodes	938	2,183	7,369
% with CT-Scan	11%	15%	9%
% with Ultrasound	57%	67%	45%
% with Hysteroscopy	7%	48%	9%
% with Colposcopy	1%	2%	17%
% with Endometrial biopsy	20%	13%	9%
Average Payment per Episode	\$11,074	\$7,994	\$1,273

The average episode payment for members with abdominal hysterectomy was \$11,221, and the average payment for members with vaginal hysterectomy was \$10,990. Of members with a hysterectomy, 66% had abdominal and 34% had vaginal hysterectomy. Other surgical procedures included hysteroscopy ablation, laparoscopic removal of lesions, myomectomy, and removal of ovarian cysts.

SOURCE: ONPOINT HEALTH D ATA

APCD Opportunities with HIE* & HIX

HIE

- Calculating Fiscal Impact of Clinical Decision-Making and Comparative Effectiveness
- Public Health Research
- Health Services Research
- Risk Adjustment and Episodic Analyses
- Populating the HIE With APCD "Non-Clinical Events"



- Rate Review
- Risk Adjustment
- Medical Loss Calculations
- Product Design
- Benefit Design
- Quality Metrics Integration

^{*} Or Other Clinical Repositories Such As Registries or Electronic Health Records.

Contact Information

Patrick Miller
Co-Chair, APCD Council
patrick.miller@unh.edu
603.536.4265

info@apcdcouncil.org www.apcdcouncil.org